

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 6 | 3-7-01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | 221 | | 3-15-01 |

INDEX OF CLAIMS

+ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|--------------------------------|
| Final Original | 11/1/01 1/4/01 2/12/01 3/15/01 |
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| 39 | |
| 40 | ✓ = |
| 41 | ✓ = |
| 42 | ✓ = |
| 43 | ✓ = |
| 44 | ✓ = |
| 45 | ✓ = |
| 46 | ✓ = |
| 47 | ✓ = |
| 48 | ✓ = |
| 49 | ✓ = |
| 50 | ✓ = |

| Claim | Date |
|----------------|--------------------------------|
| Final Original | 11/1/01 1/4/01 2/12/01 3/15/01 |
| 51 | ✓ = |
| 52 | ✓ = |
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| 55 | ✓ = |
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| Claim | Date |
|----------------|------|
| Final Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)